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Our File: 9-13528-152US KD/hb

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Number of pages including cover letter: 19
 Date: June 23, 2005
 From: Kent Daniels
 Telephone: (613) 780-86873
 E-mail: kdaniels@ogilvyrenault.com

To:	Company:	City:	Fax:
ART UNIT 2633 Examiner: Nathan M. CURS	United States Patent Office Facsimile Centre	Alexandria, VA	1.703.872-9306

Re: Serial No. 09/975,895
 Inventor(s): Kim B. ROBERTS et al.
 Title: MEASUREMENT OF POLARIZATION DEPENDENT LOSS IN AN
 OPTICAL TRANSMISSION SYSTEM

Further to my telephone conversation with Examiner Nathan CURS of today's date, please find attached a complete copy of our Response to the Office Action dated December 20, 2004.

This response was filed on April 18, 2005, as confirmed by the Auto-Reply Facsimile Transmission (copy enclosed).

We trust that the above is satisfactory and the response date remains April 18, 2005.

Heather Brown for Kent Daniels
 Patent and Trademark Assistant
 Ogilvy Renault
 (613) 780-3769
hbrown@ogilvyrenault.com

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*missing 14 pgs
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45 O'Connor Street
 Suite 1700
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 Canada K1P 1A4

Telephone (613) 230-6072
 Fax (613) 230-6706
ogilvyrenault.com

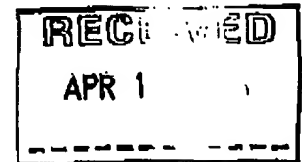
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06/23/2005 15:31 FAX 613 230 6706 OGILVY RENAULT 002
 USPTO 4/18/2005 3:26 PM PAGE 1/001 Fax Server
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KD

Auto-Reply Facsimile Transmission



TO: Fax Sender at 613 230 6706
 Fax Information
 Date Received: 4/18/2005 3:21:05 PM [Eastern Daylight Time]
 Total Pages: 13 (including cover page)

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 Page
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04/18/2005 15:28 FAX 613 230 6706		OGILVY RENAULT		002	
OGILVY RENAULT		Facsimile			
Our File:		9-13528-15ZUS KD/hb			
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Number of pages including cover letter:		13			
Date:		April 18, 2005			
From:		Kent Daniels			
Telephone:		(613) 780-86873			
E-mail:		kdaniels@ogilvyrenault.com			
ART UNIT 2633 Examiner: Nathan M. CURS		United States Patent Office Facsimile Centre		Alexandria, VA 1.703.872-9306	
Ref	Serial No.	09/975,895			
	Inventor(s):	Kim B. ROBERTS et al.			
	Title:	MEASUREMENT OF POLARIZATION DEPENDENT LOSS IN AN OPTICAL TRANSMISSION SYSTEM			
This is further to our earlier facsimile transmission of today's date forwarding our Response to the Office Action of December 20, 2004.					
It has come to our attention that the Response was not signed, therefore please find attached a signed copy of the Response.					
Heather Brown Assistant to Kent Daniels, Patent Agent Ogilvy Renault (613) 780-3769 hbrown@ogilvyrenault.com					
Secretary and Confidential Print and Scan Mark		41 Dr. Chamber Street Suite 1700 Ottawa, Ontario Canada K1P 5V4		Telephone: (613) 230-6706 Fax: (613) 230-6706 ogilvyrenault.com	
Check for the presence of telephone numbers Ogilvy Renault Ogilvy Renault					
PAGE 019 * RCVD AT 04/18/2005 3:21:05 PM [Eastern Daylight Time] * FAX 613 230 6706 * CSID:613 230 6706 * DURATION (mm-ss):02:24					

JUN 23 2005

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. CMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 120

Complete if Known

Application Number	09/975,895
Filing Date	10/15/2001
First Named Inventor	Kim B. Roberts
Examiner Name	Nathan M. Curs
Art Unit	2633
Attorney Docket No.	9-13528-152US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 19-5113 Deposit Account Name: Ogilvy Renault

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		
Multiple Dependent Claims		Fee (\$)
Fee (\$)		Fee Paid (\$)

06/29/2005 SMINASS1 00000012 195113 09975895

01 FC:1251 120.00 DA

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Our File: 9-13528-152US KD/hb

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Number of pages including cover letter: 13
Date: April 18, 2005
From: Kent Daniels
Telephone: (613) 780-86873
E-mail: kdaniels@ogilvyrenault.com

To	Company	City	Phone
ART UNIT 2633 Examiner: Nathan M. CURS	United States Patent Office Facsimile Centre	Alexandria, VA	1.703.872-9306

Re: Serial No. 09/975,895
Inventor(s): Kim B. ROBERTS et al.
Title: MEASUREMENT OF POLARIZATION DEPENDENT LOSS IN AN
OPTICAL TRANSMISSION SYSTEM

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Heather Brown
Assistant to Kent Daniels, Patent Agent
Ogilvy Renault
(613) 780-3769
hbrown@ogilvyrenault.com

Barristers and Solicitors
Patent and Trade-Mark Agents

45 O'Connor Street
Suite 1700
Ottawa, Ontario
Canada K1P 1A4

Telephone (613) 230-6072
Fax (613) 230-6706
ogilvyrenault.com

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*** TX REPORT ***

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Our File: 9-13528-152US KD/hb

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ART UNIT 2633 Examiner: Nathan M. CURS	United States Patent Office Facsimile Centre	Alexandria, VA	1.703.872-9306
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Re: Serial No. 09/975,895
Inventor(s): Kim B. ROBERTS et al.
Title: MEASUREMENT OF POLARIZATION DEPENDENT LOSS IN AN
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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/975,985	
	Filing Date	10/15/2001	
	First Named Inventor	Kim B. Roberts	
	Art Unit	2633	
	Examiner Name	Nathan M. Curs	
Total Number of Pages in This Submission	15	Attorney Docket Number	9-13528-152US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	OGILVY RENAULT	
Signature	<i>K. Daniels</i>	
Printed name	Kent Daniels	
Date	April 18, 2005	Reg. No. 44,206

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>K. Daniels</i>		
Typed or printed name	Kent Daniels	Date	April 18, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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